Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

100200416-2

CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	≀ THAN
(Column 1)					(Colu	(Column 2)		TYPE		OR	SMALL	
T	OTAL CLAIMS	· 	25				ļ.	RATE	FEE	7	RATE	FEE
FOR				NUMBER FILED		NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	OTAL CHARGEA	ABLE CLAIMS	.21 mir	21 minus 20=				X\$ 9=		OR	X\$18=	90
INE	DEPENDENT CL	LAIMS	3 mi	3 minus 3 =				X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If	the difference	e in column 1 is i	less than ze	ero, enter	r"0" in c	column 2	ı	TOTAL	-	OR	TOTAL	860
	C	LAIMS AS A	MENDE	D - PART II] ~	OTHER	
	•	(Column 1)		(Colun	mn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
_	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	,ENDEM	CLAIM] [+145=		OR	+290=	
							L	TOTAL			TOTAL	
			ADDIT. FEE			ADDIT. FEE L						
		(Column 1) CLAIMS		(Colum		(Column 3)	1 г		ADDI	1 [400L
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=] [X43=		OR	X86=	
ш	FIRST PHESE	NTATION OF MU	LTIPLE DEP	ENDENI	CLAIM		1	+145=		OR	+290=	
							L	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE L		1	ADDIT. FEE L	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	CLAIMS		HIGHE	EST		lr	— т	ADDI-	r	 -	ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1 44
ME	Independent		Minus	***		=	-	X43=			X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						┟┝	^43-		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									·	OR A	TOTAL ADDIT. FEE	
		nber Previously Paid					r four	nd in the app	ropriate box	in colu	ımn 1.	